

SCC eFile	2014 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	214519542			
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME: SMITH MOUNTAIN LAKE ASSOCIATION INC.</p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: GALE L TAYLOR 400 SCRUGGS RD STE 2100 MONETA, VA</p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE: FRANKLIN COUNTY</p> <p>4.) STATE OR COUNTRY OF INCORPORATION: VA</p> </div> <div style="width: 35%;"> <p>DUE DATE: 5/31/2014</p> <p>SCC ID NO: 01264589</p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED	
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<p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="margin-left: 40px;">ADDRESS: 400 SCRUGGS RD STE 2100</p> <p style="margin-left: 40px;">CITY/ST/ZIP: MONETA, VA 24121</p>					
<p>7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>					
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 55%; vertical-align: top;"> NAME: RANDY STOW TITLE: PRESIDENT ADDRESS: 1746 MALLARD POINT RD CITY/ST/ZIP/CO: WIRTZ, VA 24184 </td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> OFFICER </td> <td style="width: 35%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> DIRECTOR </td> </tr> </table>			NAME: RANDY STOW TITLE: PRESIDENT ADDRESS: 1746 MALLARD POINT RD CITY/ST/ZIP/CO: WIRTZ, VA 24184	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: GALE L TAYLOR TITLE: SECRETARY ADDRESS: 275 HAMPTON DR CITY/ST/ZIP/CO: UNION HALL, VA 24176	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR			
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NAME:	PATRICIA DADE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	996 OLD FRANKLIN TURNPIKE		
CITY/ST/ZIP/CO:	ROCKY MOUNT, VA 24151		
NAME:	LARRY ICEMAN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	562 FOX CHASE RD		
CITY/ST/ZIP/CO:	WIRTZ, VA 24184		
NAME:	RUSS JOHNSON	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	PO BOX 874		
CITY/ST/ZIP/CO:	HARDY, VA 24101		
NAME:	JOHN LINDSEY	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	320 FINGERLAKE RD		
CITY/ST/ZIP/CO:	PENHOOK, VA 24137		
NAME:	PATRICK MASSA	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	88 PARKWAY AVE		
CITY/ST/ZIP/CO:	MONETA, VA 24121		
NAME:	MICHAEL MCEVOY	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	2584 INGLEWOOD RD		
CITY/ST/ZIP/CO:	ROANOKE, VA 24015		
NAME:	KRISTINA MIZE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	499 PERIWINKLE RD		
CITY/ST/ZIP/CO:	MONETA, VA 24121		
NAME:	TERRY NAYLOR	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	202 MINTON CIR		
CITY/ST/ZIP/CO:	MONETA, VA 24121		
NAME:	BILL PIATT	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	2379 CAPEWOOD DRIVE		
CITY/ST/ZIP/CO:	HUDDLESTON, VA 24104		
NAME:	TIM TINGLER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	11509 OLD FRANKLIN TRNPK		
CITY/ST/ZIP/CO:	UNION HALL, VA 24176		
NAME:	ROB WHITENER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	196 WINDMERE TRAIL		
CITY/ST/ZIP/CO:	MONETA, VA 24121		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	James Colby DIRECTOR 80 Coveport Place Moneta, VA 24121	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Jim Erler DIRECTOR 109 Bay Terrace Huddleston, VA 24104	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Diana Shoudel DIRECTOR 2339 Navigation Point Goodview, VA 24095	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Charles Sinex DIRECTOR 179 Windmere Trail Moneta, VA 24121	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Lorie Smith DIRECTOR 400 Emerald Bay Dr Moneta, VA 24121	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ GALE L TAYLOR		GALE L TAYLOR, SECRETARY	
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT		DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			